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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
 (FOR USE WITH FORM PTO-875)

SERIAL NO. **141259658**
 APPLICANT(S)

FILED DATE **2/26/79**

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS	
		IND.	DEP.	IND.	DEP.		IND.
1	1					61	
2		1				62	
3		1				63	
4		1				64	
5		2				65	
6		2				66	
7		2				67	
8		1				68	
9		2				69	
10		2				70	
11		2				71	
12		1				72	
13		1				73	
14		1				74	
15		1				75	
16		1				76	
17	1		1		1	77	
18	1		1		1	78	
19	1		1		1	79	
20			1		1	80	
21			1		1	81	
22			1		1	82	
23			1		1	83	
24			2		2	84	
25			2		2	85	
26			2		2	86	
27			2		2	87	
28			2		2	88	
29			2		2	89	
30			2		2	90	
31			2		2	91	
32			2		2	92	
33			2		2	93	
34		1	2		2	94	
35		1		1		95	
36			2		2	96	
37			2		2	97	
38			2		2	98	
39			2		2	99	
40			2		2	100	
41		1		1			
42							
43							
44							
45							
46							
47							
48							
49							
50							
TOTAL IND.	4		8		8	TOTAL IND.	
TOTAL DEP.	21		24		25	TOTAL DEP.	
TOTAL CLAIMS	25		32		33	TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-1362 (REV. 3-72)

U.S. DEPARTMENT OF COMMERCE
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